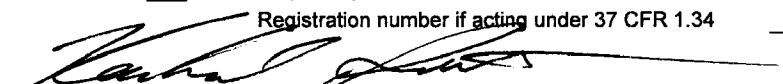


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2006</b> <b>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</b>		Docket Number (Optional) R2184.0294/P294																		
Application Number	10/759,353	Filed January 20, 2004																		
For	INFORMATION RECORDING REPRODUCING APPARATUS, PROGRAM, COMPUTER-READABLE RECORDING MEDIUM, AND DEFECT FIELD MANAGEMENT METHOD																			
Art Unit	2627	Examiner L. T. Nguyen																		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.																				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):																				
<table> <thead> <tr> <th></th> <th>Fee</th> <th>Small Entity Fee</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$120</td> <td>\$60</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$460</td> <td>\$230</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$1050</td> <td>\$525</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1640</td> <td>\$820</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2230</td> <td>\$1115</td> </tr> </tbody> </table>				Fee	Small Entity Fee	<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460	\$230	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050	\$525	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115
	Fee	Small Entity Fee																		
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60																		
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460	\$230																		
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050	\$525																		
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820																		
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115																		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1073. I have enclosed a duplicate copy of this sheet.																				
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>																				
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 33,082 <input type="checkbox"/> attorney or agent under 37 CFR 1.34.																				
Registration number if acting under 37 CFR 1.34  Signature #54,266																				
November 14, 2007 Date																				
Mark J. Thronson Typed or printed name																				
(202) 420-4742 Telephone Number																				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.																				
<input type="checkbox"/> Total of 1 forms are submitted.																				